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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Anthony First name M Middle name Giglio Last name and Suffix (Sr., Jr., II, III)	Amanda First name K Middle name Higgins Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1676	xxx-xx-7426

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Debtor 1 Anthony M Giglio Amanda K Higgins

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	205 Jasinski Avenue	If Debtor 2 lives at a different address:		
		Manville, NJ 08835 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Somerset			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 2 **Amanda K Higgins** Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ■ No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Anthony M Giglio

Debtor 1

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Deb	otor 2 Amanda K Higgin	S			Case number (if known)
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business of deadlines. If you indicate that you are a small business debtor, you must attach your most operations, cash-flow statement, and federal income tax return or if any of these document in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	Report if You Own or	Have An	, Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	Tiuzuiuc	as i roporty or An	y Freporty Friat Recoordinate Attention
	property that poses or is alleged to pose a threat	□ Yes.			
	of imminent and identifiable hazard to public health or safety?	□ res.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

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Debtor 1	Anthony M Giglio	
Debtor 2	Amanda K Higgins	Case number (if known)

Part 5: Explain Your

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-23575-KCF Doc 1 Filed 07/11/19 Entered 07/11/19 20:36:28 Desc Main Document Page 6 of 53

	otor 1 otor 2	Anthony M Giglio Amanda K Higgins	S	Document	Case nui	mber (if known)			
Par	t 6:	Answer These Questi	ons for Re	eporting Purposes					
16.		kind of debts do nave?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
				Yes. Go to line 17.					
			16b.	Are your debts primarily busines money for a business or investmen					
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe that	at are not consumer debts or bus	iness debts			
17.		ou filing under ster 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	after prop	ou estimate that any exempt erty is excluded and	Yes.	I am filing under Chapter 7. Do you are paid that funds will be available		property is excluded and administrative expenses ors?			
		nistrative expenses aid that funds will		■ No					
	be av	available for tribution to unsecured ditors?		☐ Yes					
18.		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	2 5,001-50,000			
			☐ 50-99 ☐ 100-19	99	□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000			
			□ 200-99	99					
19.		How much do you estimate your assets to be worth?	□ \$0 - \$5	,	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
				01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
				001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.		much do you nate your liabilities	□ \$0 - \$5	•	\$1,000,001 - \$10 million	\$500,000,001 - \$1 billion			
	to be			01 - \$100,000 001 - \$500.000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7:	Sign Below							
For	you		I have exa	amined this petition, and I declare u	nder penalty of perjury that the in	formation provided is true and correct.			
						ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
				ney represents me and I did not pay , I have obtained and read the notice		s not an attorney to help me fill out this			
			•	relief in accordance with the chapte		·			
			I understate bankrupto and 3571.	y case can result in fines up to \$25	ealing property, or obtaining mon- 0,000, or imprisonment for up to	ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
				ony M Giglio ⁄ M Giglio	/s/ Amanda k				
				of Debtor 1	Amanda K H Signature of De				
			Executed	on June 6, 2019	Executed on	June 6, 2019			
				MM / DD / YYYY		MM / DD / YYYY			

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Debtor 1 Debtor 2	Anthony M Giglio Amanda K Higgins	Document s	Page 7 of 53	se number (if known)	
represen	attorney, if you are ted by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify the second of the control	ed States Code, and have that I have delivered to the	explained the relief a debtor(s) the notice i	vailable under each chapter required by 11 U.S.C. § 342(b)
	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no kno	wledge after an inquii	ry that the information in the
		/s/ Kirsten B. Ennis	Date	June 6, 2019	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Kirsten B. Ennis 049501993			
		Printed name			·

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nis is an filing
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Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	287,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	301,200.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	270,330.47
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	72,795.89
	Your total liabilities	\$	343,126.36
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,635.88
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,673.96
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	Anthony M Giglio	Document	1 age 5 01 55
	Amanda K Higgins		Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$_	7,618.08

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	42,090.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	42,090.00

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ill	n this informat	ion to identify	your case and th									
Deb	tor 1	Anthony M G	iglio									
)eh	tor 2	First Name Amanda K H		Name		Last Na	ime					
	_	First Name		Name		Last Na	ime					
Init	ed States Bankr	uptcy Court for	the: DISTRICT	OF NE\	W JERSEY							
cas	e number											Check if this is ar
												amended filing
eac ink forr	it fits best. Be as	A/B: Pr arately list and descomplete and a bace is needed, a	operty	e. If two	married peop	ple are fili	ng together, b	oth are e	qually respon	nsible for su	ıpplyi	•
art	1: Describe Eac	ch Residence, Bu	ilding, Land, or Otl	her Real	l Estate You C	Own or Ha	ve an Interest	: In				
Dc	vou own or have	e anv legal or egu	uitable interest in a	nv resid	lence. buildin	ıa. land. o	r similar prope	ertv?				
_	No. Go to Part 2.	, , ,		,	,	3,,						
_	Yes. Where is the	a nranarti ()										
.1	205 Jasinski Street address, if av	Avenue ailable, or other desc	zription	What	Duplex or m	y home nulti-unit bu	ıilding		the amount of	of any secure	d clai	or exemptions. Put ms on Schedule D: ccured by Property.
					Manufacture	ed or mobil	e home		Current valu	e of the	Cu	rrent value of the
	Manville City	NJ State	08835-0000 ZIP Code			n r n n n r ti /			entire prope	rty? 7,000.00	ро	rtion you own? \$287.000.0
	City	State	ZIP Code		Investment p Timeshare	property		-		·		wnership interest
									(such as fee	simple, ten		by the entireties, or
				Who	1	•	oroperty? Chec	k one	a life estate) Fee simp	•		
	Somerset					•		-				
				_	Dobtor 1 on	d Debtor 2	only					
	County			=			•		☐ Check i	f this is com	ımun	ity property
	County				At least one	of the deb	otors and another		(see instr	uctions)	nmun	ity property

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Debto		anthony M Giglio Amanda K Higgins		Case number (if known)	
. Cai		trucks, tractors, sport utility ve	hicles, motorcycles		
■ 、					
3.1		Honda Odyssey 2010 mate mileage: 99,100 formation:	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any secur	claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property. Current value of the portion you own?
			☐ Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
3.2		Ford Fiesta 2014 mate mileage: 53,603 formation:	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any secur	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own?
			☐ Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
	ld the do		n for all of your entries from Part 2, including		\$4,000.00
•	_		hat number here		
		be Your Personal and Household Ite or have any legal or equitable in	ems erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	amples: No	goods and furnishings Major appliances, furniture, linens escribe	china, kitchenware		
		Normal and usu room and bedro	al household furnishings including kitch om furnishings	nen, dining	\$2,000.0
Ex	No		eo, stereo, and digital equipment; computers, prir edia players, games	nters, scanners; music collect	tions; electronic devices
		Xbox. TV and co	omputers		\$1.000.0

Case 19-23575-KCF Doc 1 Filed 07/11/19 Entered 07/11/19 20:36:28 Desc Main Document Page 12 of 53 **Anthony M Giglio** Debtor 1 Amanda K Higgins Debtor 2 Case number (if known) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Normal and usual clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$1,000.00 Wedding band Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list

13. Non-farm animals

- - No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$4,200.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

■ No

☐ Yes.....

Institution name:

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	otor 1 otor 2	Anthony M (Amanda K l		Document		Case number (if known)	
18.	,	•	or publicly traded st , investment accounts	ocks with brokerage firms, m	noney market accounts		
	■ No □ Yes		Institution or	rissuer name:			
	Non-pu joint ve ■ No	•	tock and interests in	incorporated and unit	ncorporated business	es, including an interest in	an LLC, partnership, and
		Give specific int	formation about them. Name of entity:			% of ownership:	
ı	Negotia Non-ne ■ No	able instruments egotiable instrun	s include personal che nents are those you ca ormation about them	er negotiable and non cks, cashiers' checks, p innot transfer to someoi	romissory notes, and m	noney orders.	
0.4	Dadinan		Issuer name:				
		nent or pensior ples: Interests in		01(k), 403(b), thrift sav	ngs accounts, or other	pension or profit-sharing plan	s
I	⊐ Yes. I	List each accour	nt separately. Type of account:	Institutio	n name:		
	Your sh		ed deposits you have r	made so that you may c id rent, public utilities (e		from a company ecommunications companies,	or others
_				Institutio	n name or individual:		
_	Annuiti ■ No	i es (A contract fo	or a periodic payment	of money to you, either	for life or for a number	of years)	
I	☐ Yes	ls	ssuer name and descri	ption.			
			on IRA, in an accoun 529A(b), and 529(b)(1		orogram, or under a q	ualified state tuition progra	m.
_	■ No □ Yes	lr	nstitution name and de	scription. Separately file	e the records of any inte	erests.11 U.S.C. § 521(c):	
_	Trusts, ■ No	equitable or fu	iture interests in pro	perty (other than anytl	ning listed in line 1), a	nd rights or powers exercis	able for your benefit
		Give specific inf	formation about them.				
	Ехатр			rets, and other intelle proceeds from royaltie		ents	
_	■ No □ Yes.	Give specific inf	formation about them.				
			and other general in rmits, exclusive license		tion holdings, liquor lice	enses, professional licenses	
I	☐ Yes.	Give specific inf	formation about them.				
Мо	ney or p	property owed	to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.

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Debtor 1 Debtor 2	, ,					case number (if known)	
28. Tax r □ No	efunds owed to you						
■ Yes	s. Give specific information about	them, includ	ding whether you al	lready f	iled the returns and	d the tax years	
		2018 T	ax Refund - \$6,0)00 us	ed to pay bills	Federal	\$6,000.00
Exar ■ No	ly support nples: Past due or lump sum alim s. Give specific information	ony, spousa	al support, child sup	oport, m	naintenance, divord	ce settlement, property s	settlement
<i>Exar</i> ■ No	r amounts someone owes you mples: Unpaid wages, disability in benefits; unpaid loans you s. Give specific information			enefits,	sick pay, vacation	pay, workers' compens	sation, Social Security
31. Intere	ests in insurance policies mples: Health, disability, or life ins	urance; hea	ılth savings accoun	t (HSA)); credit, homeown	er's, or renter's insuranc	ee
■ Yes	s. Name the insurance company of Company		y and list its value.		Beneficiar	y:	Surrender or refund value:
	Term lif	e insuran	ce - reciprocal				\$0.00
If you some	interest in property that is due you are the beneficiary of a living true eone has died. s. Give specific information				nce policy, or are c	currently entitled to recei	ve property because
	ns against third parties, whethe mples: Accidents, employment dis					or payment	
	s. Describe each claim						
■ No		laims of ev	ery nature, includ	ing co	unterclaims of the	e debtor and rights to	set off claims
	s. Describe each claim	adv liat					
■ No	financial assets you did not alre	eady list					
	d the dollar value of all of your e Part 4. Write that number here			•		l l	\$6,000.00
Part 5:	Describe Any Business-Related Prop	perty You Ow	vn or Have an Intere	st In. Lis	st any real estate in	Part 1.	
	u own or have any legal or equitable Go to Part 6.	e interest in a	any business-related	l proper	ty?		
☐ Yes.	Go to line 38.						

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Debtor 1 Anthony M Giglio Debtor 2 Amanda K Higgins			Case number (if known)		
Part		scribe Any Farm- and Commercial Fishing-Related Property You out own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do you	own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_	Examp	have other property of any kind you did not already list? les: Season tickets, country club membership			
	■ No T Voc. (Give specific information			
	⊒ 1es. (Sive specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$287,000.00
56.	Part 2	: Total vehicles, line 5	\$4,000.00		
57.	Part 3	: Total personal and household items, line 15	\$4,200.00		
58.	Part 4	: Total financial assets, line 36	\$6,000.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$14,200.00	Copy personal property total	\$14,200.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$301,200.00

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		17/7/4/11/15	30 1188: 14747.87	
Fill in this infor	mation to identify your	case:		
Debtor 1	Anthony M Giglio)		
	First Name	Middle Name	Last Name	
Debtor 2	Amanda K Higgir	ıs		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt								
1.	Which set of exemptions are you claiming	? Check one only, eve	n if you	ur spouse is filing with you.						
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Chec	ck only one box for each exemption.						
	205 Jasinski Avenue Manville, NJ	\$287,000.00		\$21,718.00	11 U.S.C. § 522(d)(1)					
	08835 Somerset County Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit						
	2010 Honda Odyssey 99,100 miles Line from <i>Schedule A/B</i> : 3.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)					
	Line Irom Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit						
	2014 Ford Fiesta 53,603 miles Line from Schedule A/B: 3.2	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)					
	Line Irom Schedule AVD. 3.2			100% of fair market value, up to any applicable statutory limit						
	Normal and usual household	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)					
	furnishings including kitchen, dining room and bedroom furnishings Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						

\$1,000.00

Xbox, TV and computers

Line from Schedule A/B: 7.1

11 U.S.C. § 522(d)(3)

\$1,000.00

100% of fair market value, up to any applicable statutory limit

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Anthony M Giglio

Amanda K Higgins Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Normal and usual clothing 11 U.S.C. § 522(d)(3) \$200.00 \$200.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Wedding band 11 U.S.C. § 522(d)(4) \$1,000.00 \$1,000.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Federal: 2018 Tax Refund - \$6,000 11 U.S.C. § 522(d)(5) \$6,000.00 \$6,000.00 used to pay bills Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

	Case 19-23575-NC		re 18	eu 07/11/19 2 of 53	20.30.28	Desi	Civialli
Fill	in this information to identify yo						
Deb	otor 1 Anthony M Gig	dio					
D 0 1	First Name	Middle Name Last N	lame				
	otor 2 Amanda K Hig First Name	gins Middle Name Last N:	lame				
Uni	ed States Bankruptcy Court for the	e: DISTRICT OF NEW JERSEY					
Cas (if kn	ee number own)					_	if this is an
	icial Form 106D						
<u>Sc</u>	hedule D: Creditor	s Who Have Claims Sec	<u>ured</u>	by Propert	У		12/15
s ne numi	eded, copy the Additional Page, fill interesting the control of th	. If two married people are filing together, both tout, number the entries, and attach it to this f					
1. Do	any creditors have claims secured	by your property?					
	☐ No. Check this box and submit	this form to the court with your other schedu	ules. You	ı have nothing else t	o report on th	nis form.	
	Yes. Fill in all of the information	below.					
Par	t 1: List All Secured Claims						
for e	ach claim. If more than one creditor ha	more than one secured claim, list the creditor sep as a particular claim, list the other creditors in Part tical order according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of co that suppor claim		Column C Unsecured portion If any
2.1	Associated Radiologists	Describe the property that secures the clair	m: _	\$383.00		\$0.00	\$383.00
	Creditor's Name	judgment DC-006516-11					
	c/o Michael S. Harrison 3155 NJ-10 Denville, NJ 07834	As of the date you file, the claim is: Check all apply. Contingent	I that				
	Number, Street, City, State & Zip Code	☐ Unliquidated					
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage car loan)	je or secui	red			
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)				
_	At least one of the debtors and another	Judgment lien from a lawsuit	•				
_	Check if this claim relates to a	☐ Other (including a right to offset)					

community debt Date debt was incurred

Last 4 digits of account number 1611

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Debtor 1	Anthony N			Case number (if known)		
	First Name	Middle N	lame Last Name			
Debtor 2	Amanda K					
	First Name	Middle N	lame Last Name			
2.2 Cac	h OF NJ		Describe the property that secures the claim:	\$4,665.47	\$0.00	\$4,665.47
Credit	tor's Name		judgment DC-007993-11			
c/o	Fein, Such	, Kahn &				
	pard		As of the date was file the plainties or a sure			
	entury Driv	e, Suite	As of the date you file, the claim is: Check all that apply.			
201			Contingent			
	sippany, N					
Numb	er, Street, City, S	State & Zip Code	Unliquidated			
M/h a assis	s the debt? C	N I	Disputed			
		neck one.	Nature of lien. Check all that apply.			
Debtor 1	-		☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 2	2 only					
■ Debtor ′	1 and Debtor 2	? only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least	one of the deb	otors and another	Judgment lien from a lawsuit			
	if this claim re	elates to a	Other (including a right to offset)			
commi	unity debt					
Date debt v	was incurred		Last 4 digits of account number 9311			
I Z .3 I	lls Fargo H	ome	Describe the assessment that assessment the alsies	\$265,282.00	\$287,000.00	\$0.00
	rtgage tor's Name		Describe the property that secures the claim:	Ψ203,202.00	Ψ201,000.00	ψ0.00
Credit	ioi s ivaille		205 Jasinski Avenue Manville, NJ			
A 44 m	. Bankeun	tov Dont	08835 Somerset County			
	ո։ Bankrup . Box 1033	•	As of the date you file, the claim is: Check all that			
_	Moines, IA	-	apply.			
			Contingent			
Numb	er, Street, City, S	state & Zip Code	Unliquidated			
Who ower	s the debt? C	Shool, and	Disputed			
_		neck one.	Nature of lien. Check all that apply.			
Debtor 1	•		☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 2			Cai loan)			
☐ Debtor ′	1 and Debtor 2	? only	☐ Statutory lien (such as tax lien, mechanic's lien)			
		otors and another	☐ Judgment lien from a lawsuit			
	if this claim re unity debt	elates to a	Other (including a right to offset)			
		Opened 07/17 Last Active				
Date debt v	was incurred	4/13/19	Last 4 digits of account number 0558			
Add the	dollar value of	f vour entries in C	Column A on this page. Write that number here:	\$270,330.	47	
		=	the dollar value totals from all pages.			
	at number her			\$270,330.	41	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 19-23373-NCI Duc.	Document Page 2	0 of 52	Desc Main
Fill in t	this information to identify your case:	Document Pane 2	J-01-35	
Debtor	1 Anthony M Giglio			
Dobtoi		lle Name Last Name		
Debtor	2 Amanda K Higgins			
(Spouse		lle Name Last Name		
United	States Bankruptcy Court for the: DISTRIC	CT OF NEW JERSEY		
Case n				Check if this is an amended filing
Sche	al Form 106E/F edule E/F: Creditors Who Have omplete and accurate as possible. Use Part 1 for			12/15
any exec Schedul Schedul left. Atta	cutory contracts or unexpired leases that could e G: Executory Contracts and Unexpired Leases e D: Creditors Who Have Claims Secured by Pro ich the Continuation Page to this page. If you had d case number (if known).	result in a claim. Also list executory of (Official Form 106G). Do not include operty. If more space is needed, copy ove no information to report in a Part, of	contracts on Schedule A/B: Property (Offi any creditors with partially secured clain the Part you need, fill it out, number the	ficial Form 106A/B) and on ms that are listed in entries in the boxes on the
	any creditors have priority unsecured claims ag			
_	No. Go to Part 2.	,		
	Yes.			
	Tes. List All of Your NONPRIORITY Unsecu	red Claims		
4. List	No. You have nothing to report in this part. Submit to Yes. t all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	alphabetical order of the creditor who aim. For each claim listed, identify what t	holds each claim. If a creditor has more ype of claim it is. Do not list claims already	included in Part 1. If more
Par	t 2.			Tatal alaim
				Total claim
4.1	Bank Of America	Last 4 digits of account number	9733	\$28,075.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 02/11 Last Active 1/06/18	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did no	ot
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	I	

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	1 Anthony M Giglio 2 Amanda K Higgins		Case number (if known)					
4.2	Citibank/Best Buy	Last 4 digits of account number	5457	\$490.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i	Opened 01/17 Last Active 12/22/18	Ţ.oose				
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Charge Acc	count					
4.3	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0519	\$9,135.00				
	Attn: Claims Dept Po Box 9635	When was the debt incurred?	Opened 05/10 Last Active 4/30/19					
	Wilkes Barr, PA 18773 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify						
		Educationa	ıl					
4.4	Dept of Ed / Navient	Last 4 digits of account number	0111	\$6,158.00				
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 01/11 Last Active 4/30/19					
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify						
		Educationa						

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	1 Anthony M Giglio 2 Amanda K Higgins		Case number (if known)		
4.5	Dept of Ed / Navient	Last 4 digits of account number	1219	\$5,497.00	
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 12/11 Last Active 4/30/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	☐ Other. Specify			
		Educationa	I		
	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	1021	\$5,146.00	
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 10/11 Last Active 4/30/19		
_	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify			
		Educationa	I		
	Dept of Ed / Navient	Last 4 digits of account number	0519	\$3,763.00	
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 05/10 Last Active 4/30/19		
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	■ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	\square Debts to pension or profit-sharin	g plans, and other similar debts		
	□Yes	Other. Specify			
		Educationa	ı		

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Debtor :	1 Anthony M Giglio 2 Amanda K Higgins		Case number (if known)						
4.8	Dept of Ed / Navient	Last 4 digits of account number	1003	\$3,725.00					
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 10/17 Last Active 4/30/19	ψο,:					
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent☐ Unliquidated							
	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	d claim:						
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No		ration agreement or divorce that you did not						
	■ No □ Yes	☐ Other. Specify	g plans, and other similar debts						
	Li res	Educationa	I						
	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0111	\$2,982.00					
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 01/11 Last Active 4/30/19						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	☐ Debtor 1 only	Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:						
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims							
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts						
	☐ Yes	Other. Specify							
		Educationa	l .						
٠ ١	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	1219	\$2,875.00					
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 12/11 Last Active 4/30/19						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	Debtor 1 only								
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıalın:						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loansObligations arising out of a sepa report as priority claims							
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	Other. Specify							
		Educationa	ı						

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	1 Anthony M Giglio 2 Amanda K Higgins		Case number (if known)	
4.1 1	Dept of Ed / Navient	Last 4 digits of account number	1021	\$2,809.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 10/11 Last Active 4/30/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
	_ 133	Educationa	al	
4.1	EOS CCA	Last 4 digits of account number	1733	\$100.12
	Nonpriority Creditor's Name PO BBOX 981008 Boston, MA 02298	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	• •	
	Yes	Other. Specify CREDTOR	FOR VERIZON	
4.1	Family Care Nonpriority Creditor's Name	Last 4 digits of account number	M001	\$444.37
	257 East Route 22 Green Brook, NJ 08812	When was the debt incurred?		
=	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		

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	1 Anthony M Giglio 2 Amanda K Higgins		Case number (if known)				
4.1	IC System, Inc.	Last 4 digits of account number	1654	\$746.40			
	Nonpriority Creditor's Name 444 Highway 96 East P. O. Box 64437 Saint Paul, MN 55164-0437	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
4.1 5	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9460	\$204.00			
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 02/18 Last Active 4/13/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	et City State Zip Code As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only □ Contingent						
	□ Debtor 2 only □ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.1	SaVit Collection Agency Nonpriority Creditor's Name	Last 4 digits of account number	1901	\$419.00			
	Attn: Bankruptcy Po Box 250	When was the debt incurred?	Opened 04/18				
	East Brunswick, NJ 08816						
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only Contingent						
	■ Debtor 2 only						
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No □ Debts to pension or profit-sharing plans, and other similar debts						
	***	Collection	Attorney Miles Of Smiles Family				
	Yes	Other. Specify Denti					

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	or 1 Anthony M Giglio or 2 Amanda K Higgins		Case number (if known)						
4.1 7	Verizon	Last 4 digits of account number	0001	\$227.00					
	Nonpriority Creditor's Name Verizon Wireless Bk Admin 500 Technology Dr Ste 550 Weldon Springs, MO 63304	When was the debt incurred?	Opened 3/24/10 Last Active 10/16/18						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
☐ Check if this claim is for a community debt Is the claim subject to offset?		☐ Student loans ☐ Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not						
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts						
	Yes	Other. Specify Agriculture	9						
Part :	3: List Others to Be Notified About a De	ebt That You Already Listed							
is tr hav	ying to collect from you for a debt you owe to s	omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	you already listed in Parts 1 or 2. For example, if an Parts 1 or 2, then list the collection agency here itional creditors here. If you do not have additional	. Similarly, if you					
	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?						
	in & Rothman, LLC	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims						
	' Veterans Highway ndia, NY 11749		Part 2: Creditors with Nonpriority Unsecured Claims	6					
. 5.41	,	Last 4 digits of account number	5919						

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	42,090.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	30,705.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	72,795.89

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		I A A A A I I I I I		
Fill in this infor	mation to identify your	case:		
Debtor 1	Anthony M Giglio)		
	First Name	Middle Name	Last Name	
Debtor 2	Amanda K Higgir	าร		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY	
Case number				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or	company with Name, Number,	whom you have the Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
Name				
Number	Street			<u> </u>
City		State	ZIP Code	
Name				
Number	Street			_
City		State	7IP Codo	<u> </u>
City		State	ZIF Code	
Name				
Number	Street			
Citv		State	ZIP Code	_
Name				
Number	Street			<u> </u>
City		State	ZIP Code	_
- · · · ·		Oldio	211 0000	
Name				_
Number	Street			<u> </u>
City		State	ZIP Code	<u> </u>
	Name Number City Name Number City Name Number City Name Number City Name	Name Number Street City Name Number Street	Number Street City State Name Number Street Name Number Street City State	Number Street City State ZIP Code Name Number Street City State ZIP Code

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		Document	Page 28 of	53	•	
Fill in this info	ormation to identify your c	ase:				
Debtor 1	Anthony M Giglio					
	First Name	Middle Name	Last Name			
Debtor 2	Amanda K Higgins					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSE	Υ			
Case number						
(if known)					☐ Check if th	
					amended f	iling
Official E	orm 106H					
		14				
Scheau	e H: Your Code	btors				12/15
1. Do you ☐ No ☐ Yes 2. Within tarizona, Co ☐ No. Go	the last 8 years, have you l alifornia, Idaho, Louisiana, N to line 3.	ou are filing a joint case, do n lived in a community prope Nevada, New Mexico, Puerto	erty state or territory Rico, Texas, Washin	? (Community proper		include
⊔ Yes. Did	d your spouse, former spous	se, or legal equivalent live wit	h you at the time?			
in line 2 a	gain as a codebtor only if D), Schedule E/F (Official F	rs. Do not include your spo that person is a guarantor of Form 106E/F), or Schedule of	or cosigner. Make s	ure you have listed t	he creditor on Sched	ule D (Official
	mn 1: Your codebtor , Number, Street, City, State and ZIP	Code		Column 2: The cr Check all schedul	editor to whom you o es that apply:	we the debt
3.1 Hus	band and wife			☐ Schedule D, ☐ Schedule E/F☐ Schedule G _	, line	

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Fill	in this information to identify your	case:		
Deb	otor 1 Anthony M	Giglio		
	otor 2 Amanda K use, if filing)	Higgins		
Uni	ted States Bankruptcy Court for th	e: DISTRICT OF NEW	JERSEY	
	se number nown)		-	Check if this is: An amended filing A supplement showing postpetition chapter
\bigcirc	fficial Form 1061			13 income as of the following date:
	fficial Form 106l			MM / DD/ YYYY
	chedule I: Your Inc			12/15 and Debtor 2), both are equally responsible for
atta	t 1: Describe Employment	. On the top of any addit		on about your spouse. If more space is needed, I case number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	☐ Employed
	attach a separate page with information about additional	proyonc otatao	☐ Not employed	■ Not employed
	employers.	Occupation	Physical Therapist	Stay at home mom
	Include part-time, seasonal, or self-employed work.	Employer's name	PTC Therapeutics	
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed t	there? 13 months	
Par	Give Details About Mo	onthly Income		
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to report for any	line, write \$0 in the space. Include your non-filing
	u or your non-filing spouse have n e space, attach a separate sheet t		ombine the information for all emp	oyers for that person on the lines below. If you need
				For Debtor 1 For Debtor 2 or non-filing spouse
2.	List monthly gross wages, sal deductions). If not paid monthly			6,545.15 \$ 0.00

3.

0.00

6,545.15

+\$

\$

0.00

0.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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	otor 1 otor 2	Anthony M Giglio Amanda K Higgins	_	C	Case i	number (<i>if known</i>)				
					For	Debtor 1		Debtor n-filing s		
	Cop	by line 4 here	4.		\$	6,545.15	\$_		0.00	_
5.	l ief	t all payroll deductions:								
0.		• •	5 0		¢	022.20	¢		0.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$_ \$	833.30	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$ 	0.00	* \$_		0.00	_
	5d.	Required repayments of retirement fund loans	5d		_{\$} —	392.71 0.00	- \$ -		0.00	_
	5e.	Insurance	5e		\$ _	396.18	Ψ_		0.00	_
	5f.	Domestic support obligations	5f.		<u>\$</u> —	0.00	ς \$		0.00	_
	5g.	Union dues	5g		$\mathring{\$}^-$	0.00	* * -		0.00	_
	5h.		5h		$\dot{\$}^-$	287.08	+ \$-		0.00	_
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		* — \$	1,909.27	\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,635.88	\$		0.00	_
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1	\$	0.00	\$		0.00	_
	8b.	•	8b		<u>*</u> —	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c	; .	\$	0.00	\$		0.00	_
	8d.	Unemployment compensation	8d	i.	\$	0.00	\$		0.00	_
	8e.	Social Security	8e) .	\$	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	ee 8f. 8g		\$ 	0.00	\$_ \$_		0.00 0.00	_
	8h.	Other monthly income. Specify:	8h	1.+	\$	0.00	+ \$		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5	0.00	\$_		0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10	•		4 625 00 . ¢		0.00	= \$	4 C2E 00
10.		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	- '	4,635.88 + \$		0.00	= \$ _	4,635.88
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	ır depe			•			∍ J. +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The rete that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	4,635.88
13.	Do	you expect an increase or decrease within the year after you file this forn	n?						Combine month!	ned ly income
	_	No. Yes Explain:								

-HII	in this informa	tion to identify yo	our caco:			1					
						01					
Deb	Debtor 1 Anthony M Giglio						Check if this is: ☐ An amended filing				
	otor 2 ouse, if filing)	Amanda K H	iggins				A supplement show 13 expenses as of	wing postpetition chapter the following date:			
Unit	ed States Bankı	uptcy Court for the:	DISTRI	CT OF NEW JERSEY			MM / DD / YYYY				
	e number nown)										
Of	fficial Fo	rm 106J				-					
So	chedule	J: Your I	Exper	ises				12/1			
Be	as complete ormation. If m	and accurate as	possible. eded, atta	If two married people a ch another sheet to this							
Par		ibe Your House	hold								
1.	Is this a joir										
	□ No. Go to	ıne 2. s Debtor 2 live i	in a senar:	ate household?							
	■ N	0	·	al Form 106J-2, <i>Expense</i> s	s for Separate House	e <i>hold</i> of Deb	otor 2.				
2.	Do vou have	e dependents?	□ No	• •	,						
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?			
	Do not state dependents				Daughter		5	□ No ■ Yes □ No			
					Daughter		6	■ Yes			
								☐ Yes ☐ No			
3.	expenses o	oenses include f people other th d your depender	han 👝	No Yes				☐ Yes			
Est exp	imate your ex	ate Your Ongoin openses as of your adate after the b	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a sup	you are using this followed the second secon	orm as a su e J, check th	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the			
the		h assistance and		government assistance is luded it on Schedule I:			Your exp	enses			
4.		or home owners		ses for your residence.	Include first mortgag	e 4. S	\$	2,019.96			
	If not includ	led in line 4:									
	4a. Real e	estate taxes				4a. \$	\$	0.00			
		rty, homeowner's				4b. \$	\$	0.00			
		maintenance, re owner's associati		ipkeep expenses		4c. 9 4d. 9	·	150.00			
5.				our residence, such as ho	ome equity loans	4u. 3		0.00 0.00			

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	otor 1 otor 2	Anthony Amanda	M Giglio K Higgins		Case nur	mber (if known)	
6.	Utilit	ies:					
	6a.	Electricity,	heat, natural gas		6a	. \$	270.00
	6b.	Water, sev	ver, garbage collection		6b	. \$	90.00
	6c.	Telephone	, cell phone, Internet, sa	atellite, and cable services	6c	. \$	74.00
	6d.	Other. Spe	ecify: Cable and inte	ernet	6d	. \$	125.00
7.	Food	d and house	ekeeping supplies		7	. \$	1,000.00
8.	Child	dcare and c	hildren's education co	ests	8	. \$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning		9	. \$	75.00
10.	Pers	onal care p	roducts and services		10	. \$	50.00
11.	Medi	ical and dei	ntal expenses		11	. \$	175.00
12.	Transportation. Include gas, maintenance, bus or train fare.					450.00	
			ar payments.		12	· · · · · · · · · · · · · · · · · · ·	150.00
				spapers, magazines, and book			130.00
14.			ributions and religious	donations	14	. \$	0.00
15.		rance.			00		
				your pay or included in lines 4 o		c	0.00
		Life insura			15a		0.00
		Health ins			15b		0.00
		Vehicle ins			15c	·	165.00
4.0			rance. Specify:		15d	. \$	0.00
	Spec	cify:		om your pay or included in lines		. \$	0.00
17.			ease payments:			•	
			ents for Vehicle 1		17a	·	0.00
			ents for Vehicle 2		17b		0.00
		Other. Spe			17c	· ——	0.00
		Other. Spe	•		17d	. \$	0.00
18.				ce, and support that you did n		. \$	200.00
10				nedule I, Your Income (Official others who do not live with yo	. o	. \$ 	0.00
19.			you make to support	others who do not live with yo	19		0.00
20	Spec	· —	arty avnances not incl	uded in lines 4 or 5 of this forn			
20.			on other property	uded in lines 4 or 5 or tries form	20a		0.00
		Real estat			20b	·	0.00
			nomeowner's, or renter's	sinsurance	20c	· · · — — —	0.00
			ce, repair, and upkeep		20d		0.00
			er's association or cond	•	20e	·	0.00
21.			er s association or cond	ommun dues		. ψ . +\$	
۷۱.	Othe	er: Specify:				. +Ψ	0.00
22.	Calc	ulate your ı	nonthly expenses				
		Add lines 4				\$	4,673.96
	22b.	Copy line 22	2 (monthly expenses for	Debtor 2), if any, from Official F	orm 106J-2	\$	
	22c.	Add line 22a	a and 22b. The result is	your monthly expenses.		\$	4,673.96
23. Calculate your monthly net income.							
	23a.	Copy line	12 (your combined mon	thly income) from Schedule I.	23a	. \$	4,635.88
			monthly expenses from		23b	\$	4,673.96
	23c.		our monthly expenses fr is your <i>monthly net inco</i>	om your monthly income.	23c	. \$	-38.08
24.	For exmodif	xample, do yo ication to the O.	u expect to finish paying fo terms of your mortgage?	e in your expenses within the r your car loan within the year or do y			rease or decrease because of a
	□ Ye	es.	Explain here:				

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Fill in this infor	mation to identify your	case:					
Debtor 1	Anthony M Giglio	0					
	First Name	Middle Name	Las	t Name			
Debtor 2	Amanda K Higgi	ns					
Spouse if, filing)	First Name	Middle Name	Las	t Name			
Jnited States Ba	ankruptcy Court for the:	DISTRICT OF NEV	V JERSEY				
Case number							
f known)						☐ Check if t	this is an
						amended	
		,	esponsible for s	upplying correc	i illiorillation.		
btaining mone	is form whenever you f y or property by fraud l8 U.S.C. §§ 152, 1341,	ile bankruptcy sched	dules or amende	ed schedules. M	aking a false st		
otaining mone ears, or both. 1	y or property by fraud i	ile bankruptcy sched	dules or amende	ed schedules. M	aking a false st		
otaining mone ears, or both. 1	y or property by fraud i I8 U.S.C. §§ 152, 1341,	ile bankruptcy scheo in connection with a 1519, and 3571.	dules or amende bankruptcy cas	ed schedules. Me e can result in fi	aking a false st nes up to \$250	,000, or imprisonment	
otaining mone ears, or both. 1	y or property by fraud i l8 U.S.C. §§ 152, 1341, in Below	ile bankruptcy scheo in connection with a 1519, and 3571.	dules or amende bankruptcy cas	ed schedules. Me e can result in fi	aking a false st nes up to \$250	,000, or imprisonment	
otaining mone ears, or both. 1 Sig Did you pa	y or property by fraud i l8 U.S.C. §§ 152, 1341, in Below	ile bankruptcy scheo in connection with a 1519, and 3571.	dules or amende bankruptcy cas	ed schedules. Me e can result in fi	aking a false st nes up to \$250 kruptcy forms?	,000, or imprisonment	arer's Notice,
otaining mone ears, or both. 1 Sig Did you pa	y or property by fraud in the U.S.C. §§ 152, 1341, in Below	ile bankruptcy scheo in connection with a 1519, and 3571.	dules or amende bankruptcy cas	ed schedules. Me e can result in fi	aking a false st nes up to \$250 kruptcy forms?	,000, or imprisonment	arer's Notice,
Did you pa	y or property by fraud in the U.S.C. §§ 152, 1341, in Below	ile bankruptcy sched in connection with a 1519, and 3571.	dules or amende bankruptcy cas	ed schedules. Me e can result in fi	aking a false st nes up to \$250 kruptcy forms? Attach Bandarati	,000, or imprisonment ankruptcy Petition Prepion, and Signature (Office	arer's Notice,
Did you pa No Yes. I	y or property by fraud in Below ay or agree to pay some Name of person	ile bankruptcy sched in connection with a 1519, and 3571.	dules or amende bankruptcy cas attorney to help summary and s	ed schedules. Me e can result in fi	Attach Babelarati	,000, or imprisonment ankruptcy Petition Prepion, and Signature (Office	arer's Notice,
Did you pa No Yes. I Under penathat they ar X /s/ Ant Antho	y or property by fraud in the control of the contro	ile bankruptcy sched in connection with a 1519, and 3571.	dules or amende bankruptcy cas attorney to help summary and s	ed schedules. Me can result in fi	Attach Babelaration by Balance Struptcy forms? Attach Babelaration beclaration by Balance Bal	,000, or imprisonment ankruptcy Petition Prepion, and Signature (Office	for up to 20
Did you pa No Yes. I Under penathat they ar X /s/ Ant Antho	y or property by fraud in the control of the contro	ile bankruptcy sched in connection with a 1519, and 3571.	dules or amende bankruptcy cas attorney to help summary and s	ed schedules. Me can result in fi	Attach Babelaration by Balance Struptcy forms? Attach Babelaration beclaration by Balance Bal	,000, or imprisonment ankruptcy Petition Prepion, and Signature (Office	for up to 20

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Fill in this infor	mation to identify you	r case.							
Debtor 1	Anthony M Gigli								
Debtor 1	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	Amanda K Higgi First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY						
Case number (if known)					Check if this is an mended filing				
Be as complete	t of Financial	ble. If two married people		equally responsible for sup					
number (if know	n). Answer every ques	stion.		y additional pages, write you	ir name and case				
<u> </u>		rital Status and Where You	I Lived Before						
_	ır current marital statu	IS?							
■ Married Not ma	-								
2. During the	last 3 years, have you	lived anywhere other than	where you live now?						
□ No									
Yes. Lis	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there				
56 Daytor Middlese	n Avenue x, NJ 08846	From-To: 2010/2017	■ Same as Debtor	1	Same as Debtor 1 From-To:				
states and territor	<i>ri</i> es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territory ico, Texas, Washington and W					
Part 2 Expla	in the Sources of You	r Income							
Fill in the tot	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parte together, list it only once ur		ıdar years?				
□ No ■ Yes. Fi	II in the details.								
		Debtor 1		Debtor 2					
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$33,276.18	☐ Wages, commissions, bonuses, tips	\$0.00				
		☐ Operating a business		☐ Operating a business					
Official Form 107		Statement of Financial Af	fairs for Individuals Filing for B	ankruptcy	page '				

page 1

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Debtor	2 An	nanda K H	iggins		Cas	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018		31, 2018)	■ Wages, commissions, bonuses, tips	\$69,414.00	☐ Wages, commissions, bonuses, tips	\$0.00	
				☐ Operating a business		☐ Operating a business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$66,759.00	☐ Wages, commissions, bonuses, tips	\$0.00
				☐ Operating a business		☐ Operating a business	
Lis ■	No	source and t	Ü	ome from each source separat	ely. Do not include income f	nat you listed in line 4.	
Ц	Yes.	Fill in the de	tails.				
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
i. Ar	Yes.	Neither Deindividual puring the No. Yes	90 days before 30 days before 40 days before 50 day	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the t on 4/01/22 and every 3 years or both have primarily consu- pre you filed for bankruptcy, di	Imer debts. Consumer debted purpose." d you pay any creditor a total d a total of \$6,825* or more atts for domestic support obligations bankruptcy case. In a fater that for cases filed on timer debts. d you pay any creditor a total d a total of \$600 or more an	al of \$6,825* or more? in one or more payments an gations, such as child support or after the date of adjustment of \$600 or more? d the total amount you paid to	d the total amount you rt and alimony. Also, do ent.
C	reditor'	s Name and	Í	Dates of payme	nt Total amount	Amount you Was thi	s payment for
0	Juitor	o manie alle		Dates of payine	paid	still owe	o paymont for m

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Debtor 1 Anthony M Giglio

Del	btor 2	Amanda K Higgins		Cas	se number (if known)		
7.	<i>Inside</i> of whi	n 1 year before you filed for bankruptcers include your relatives; any general particle you are an officer, director, person in the ciness you operate as a sole proprietor. 11 ny.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which y g securities; and a	rou are a genera any managing a	al partner; corporations gent, including one for	
		No						
		Yes. List all payments to an insider.						
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
В.	inside	n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cosi		ments or transfer a	any property on	account of a d	ebt that benefited an	
		No						
		es. List all payments to an insider						
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name	
Da	rt 4:	Identify Legal Actions, Repossession	a and Faranlanuran					
	□ No ■ Yes. Fill in the details. Case title		Nature of the case	Court or agency		Status of the case		
	Case	number						
	GIGI L000	k Of America Na vs ANTHONY LIO 025919 0259-19	Collection Somerset County Clerk 20 Grove Street PO Box 3000 Somerville, NJ 08876		t	☐ Pending ☐ On appe ☐ Conclud	eal	
						28075.99		
10.	Check	n 1 year before you filed for bankrupto call that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?	
	Cred	litor Name and Address	Describe the Property Date)	Value of the		
			Explain what happened					
11.	1. Within 90 days before you filed for bankru accounts or refuse to make a payment becomes No Yes. Fill in the details.			uding a bank or fir	nancial institutio	n, set off any a	amounts from your	
	Cred	litor Name and Address	Describe the action the creditor took Date take			te action was Amount		
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or ar No Yes		rty in the possess			efit of creditors, a	

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	btor 1 Anthony M Giglio btor 2 Amanda K Higgins	Case number	er (if known)	
Pa	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:	Describe the gifts	Dates you gave the gifts	Value
14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contr	cy, did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling? No Yes. Fill in the details.	y or since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster
	how the loss occurred Inc	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prep	y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services requir		rty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Kirsten B. Ennis, Esq 50 Division Street Suite 102 Somerville, NJ 08876	Chapter 7 retainer and filing fees		\$2,990.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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	otor 2 Amanda K Higgins			Case nur	mber (if known)	
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alread No	business or financial aft nade as security (such as	fairs? the granting of a			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and property transfer		paym	ribe any property or nents received or debts in exchange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-policy No ☐ Yes. Fill in the details.		ny property to a	self-settle	ed trust or similar device	of which you are a
	Name of trust	Description and	value of the prop	perty tran	sferred	Date Transfer was
						made
Par	tt 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	it Boxes, and Sto	orage Uni	its	
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	unts; certificates	of depos		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Bank of America Manville, NJ 08835	XXXX-	■ Checking □ Savings □ Money Mar □ Brokerage □ Other	ket		\$100.00
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed fo	or bankruptcy, ar	ny safe de	eposit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	ır home within 1	year befo	ore you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?

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Debtor 1 Anthony M Giglio Debtor 2 Amanda K Higgins

Case number (if known)

Par	19: Identify Property You Hold or Control for	Someone Else						
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
	No							
	Yes. Fill in the details.		_					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	10: Give Details About Environmental Inform	nation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	- ·					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No							
	Yes. Fill in the details.	Court or organis	Nature of the case	Status of the				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case				
Par	111: Give Details About Your Business or Cor	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to an	y business?				
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company	•	•					
	☐ A partner in a partnership	•	•					
		tive of a corporation						
	☐ An owner of at least 5% of the voting or							

Case 19-23575-KCF Doc 1 Filed 07/11/19 Entered 07/11/19 20:36:28 Desc Main Page 40 of 53 Document **Anthony M Giglio** Debtor 2 Amanda K Higgins Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Anthony M Giglio /s/ Amanda K Higgins Amanda K Higgins **Anthony M Giglio** Signature of Debtor 1 Signature of Debtor 2 Date Date June 6, 2019 June 6, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your ca	se:		1
Debtor 1	Anthony M Giglio			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2	Amanda K Higgins			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	DISTRICT OF N	EW JERSEY	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
		for Indiv	viduals Filing Under Chapt	er 7
Otatomoi	Tt Or Intontion	TOT III GI	viduals i milg shasi shapt	12/13
If you are an ind	ividual filing under chapte	er 7, you must fi	II out this form if:	
creditors have	e claims secured by your	property, or		
	sed personal property and			
			r you file your bankruptcy petition or by the date s ne time for cause. You must also send copies to t	
on the	· · · · · · · · · · · · · · · · · · ·	ourt externus tr	te time for cause. For must also send copies to the	ne creditors and lessors you list
If two married ne	eonle are filing together in	a joint case, b	oth are equally responsible for supplying correct	information. Both debtors must
	nd date the form.	a joint cace, b	on are equally responsible for supplying contest	
	and accurate as possible. our name and case numb		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
write y	our name and case name	er (ii kilowii).		
Part 1: List Yo	our Creditors Who Have S	ecured Claims		
information be	elow.		D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the cr	editor and the property that	is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C?
			secures a dept?	as exempt on schedule C?
	Vells Fargo Home Mort	gage	☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	■ Yes
Description of	205 Jasinski Avenue	Manville,	Retain the property and enter into a Reaffirmation Agreement.	■ res
property	NJ 08835 Somerset	County	Retain the property and [explain]:	
securing debt:				
Dow O. Liet V	and the armined Danas and D			
	our Unexpired Personal P ed personal property leas		I in Schedule G: Executory Contracts and Unexpi	red Leases (Official Form 106G), fill
in the informatio	n below. Do not list real e	estate leases. Ui	nexpired leases are leases that are still in effect; t	he lease period has not yet ended.
You may assume	e an unexpired personal p	roperty lease if	the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your u	nexpired personal proper	ty leases		Will the lease be assumed?
Lessor's name:				П.
Description of lea	ased			□ No
Property:				☐ Yes
Lananda cara				-
Lessor's name: Description of lea	ased			□ No
Property:	-			☐ Yes
Lessor's name:				
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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	otor 1 Anthony M Gigl otor 2 Amanda K Higg		Case number (if known)
	scription of leased perty:		□ No
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Des	ssor's name: scription of leased perty:		□ No □ Yes
Und prop	perty that is subject to an	·	
X	Anthony M Giglio Anthony M Giglio Signature of Debtor 1	X /s/ Amanda Amanda K I Signature of D	liggins
	Date June 6, 201 9	9 Date June 6	, 2019

Fill in this info	rmation to identify your case:				e box only as d	irected in	this form and	in Form
Debtor 1	Anthony M Giglio			2A-1Sı	ipb:			
Debtor 2 (Spouse, if filing)	Amanda K Higgins			■ 1. T	here is no pres	umption o	of abuse	
United States	Bankruptcy Court for the: District of New Jer	sey		ä	The calculation to applies will be m	nade und	er Chapter 7 N	
Case number (if known)				□ з. т	Calculation (Offi	does not	apply now be	
					qualified military			ріу іаіет.
Official E	- arm 100 A 1			⊔ Cn	eck if this is a	n ameno	dea filing	
	Form 122A - 1	. ==						
Chapter	7 Statement of Your Cur	rent Mor	nthly inc	om	е			12/1
attach a separa case number (if qualifying milita	and accurate as possible. If two married people a te sheet to this form. Include the line number to w known). If you believe that you are exempted froi rry service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies se you	On the top of an do not have prin	ny additio narily con	nal pages, write sumer debts or	e your name and r because of
1. What is	your marital and filing status? Check one or	nly.						
☐ Not n	narried. Fill out Column A, lines 2-11.							
■ Marri	ed and your spouse is filing with you. Fill ou	ut both Columns	A and B, lines	2-11.				
☐ Marri	ed and your spouse is NOT filing with you.	You and your s	spouse are:					
□Liv	ing in the same household and are not lega	illy separated.	Fill out both Co	lumns	A and B, lines 2	2-11.		
pe	ring separately or are legally separated. Fill on nalty of perjury that you and your spouse are loing apart for reasons that do not include evadir	egally separated	d under nonbar	kruptc	y law that applic	es or that		
101(10A). Fo the 6 months	erage monthly income that you received from all or example, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh Aug de any i	gust 31. If the amo	ount of you ore than o	r monthly incomence. For example	e varied during le, if both
·			, ,	Colur	nn A	Columi	n B	
	oss wages, salary, tips, bonuses, overtime, eductions).	and commission	ons (before all	\$	7,618.08	\$	0.00	
Column	and maintenance payments. Do not include B is filled in.	. ,	•	\$	0.00	\$	0.00	
of you o from an u and roon	unts from any source which are regularly par r your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inco	me from operating a business, profession,							
			otor 1					
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>						
•	and necessary operating expenses		Copy here ->	¢	0.00	\$	0.00	
	thly income from a business, profession, or farm	m \$	Copy liere >	Ψ	0.00	Ψ		
6. Net inco	me from rental and other real property	Deh	otor 1					
Gross re	ceipts (before all deductions)	\$ 0.00						
	and necessary operating expenses	-\$ 0.00						
•	thly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	
	dividends, and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

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	Amanda K Higgins			Case number	er (if known)			
				Column A Debtor 1		Column E Debtor 2 non-filing	or	
. Unem	ployment compensation			\$	0.00	\$	0.00	
	t enter the amount if you contend that the amoun ocial Security Act. Instead, list it here:	t received was a bene	fit unde	er				
For	you \$ your spouse \$	0.	00					
			00					
benefi	ion or retirement income. Do not include any ar it under the Social Security Act.			\$	0.00	\$	0.00	
Do not receive	ne from all other sources not listed above. Spet include any benefits received under the Social street as a victim of a war crime, a crime against hustic terrorism. If necessary, list other sources on a below.	Security Act or paymer manity, or internationa	nts I or					
	•			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		_ +	*	0.00	\$	0.00	
	late your total current monthly income. Add lincolumn. Then add the total for Column A to the to		\$	7,618.08	+ -	0.00	= \$	7,618.08
							Total	current monthly
rt 2:	Determine Whether the Means Test Applies	to You						
40 6								
M	Copy your total current monthly income from line Multiply by 12 (the number of months in a year) The result is your annual income for this part of the			Сор	y line 11 l		x 2b. \$	7,618.08 12 91,416.96
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Anthony M Giglio

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Debtor 1 Debtor 2 Anthony M Giglio
Amanda K Higgins

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment

Income by Month:

6 Months Ago:	01/2019	\$6,041.68
5 Months Ago:	02/2019	\$14,801.90
4 Months Ago:	03/2019	\$6,216.30
3 Months Ago:	04/2019	\$6,216.30
2 Months Ago:	05/2019	\$6,216.30
Last Month:	06/2019	\$6,216.00
	Average per month:	\$7.618.08

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-23575-KCF Doc 1 Filed 07/11/19 Entered 07/11/19 20:36:28 Desc Main Document Page 50 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey

In	Anthony M Giglio re Amanda K Higgins		Case No.		
	Ananda Kriiggiiis	Debtor(s)	Chapter	7	
				TDTOD(G)	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	2,500.00	
	Prior to the filing of this statement I have received		\$	2,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compet	nsation with any other person	unless they are mem	bers and associates of m	y law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				firm. A
5.	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspect	s of the bankruptcy	ease, including:	
	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, staterc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which s and confirmation hearing, an	may be required; and any adjourned hea	rings thereof;	
	Negotiations with secured creditors to re- reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	s as needed; preparation			
5.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discount any other adversary proceeding.	does not include the following hargeability actions, judi	g service: cial lien avoidanc	es, relief from stay a	ctions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debt	or(s) in
	June 6, 2019	/s/ Kirsten B. Enr	nis		
-	Date	Kirsten B. Ennis	049501993		_
		Signature of Attorne Kirsten B. Ennis,			
		50 Division Stree			
		Suite 102 Somerville, NJ 08	8876		
		908-713-0345 Fa			_
		Name of law firm			

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United States Bankruptcy CourtDistrict of New Jersey

In re	Anthony M Giglio Amanda K Higgins		Case No.	
		Debtor(s)	Chapter	7
Γhe ab		TEICATION OF CREDITOR that the attached list of creditors is true and c		of their knowledge.
Date:	June 6, 2019	/s/ Anthony M Giglio Anthony M Giglio		
		Signature of Debtor		
Date:	June 6, 2019	/s/ Amanda K Higgins		
		Amanda K Higgins		

Signature of Debtor

Associated Radiologists c/o Michael S. Harrison 3155 NJ-10 Denville, NJ 07834

Bank Of America 4909 Savarese Circle Fl1-908-01-50 Tampa, FL 33634

Cach OF NJ c/o Fein, Such, Kahn & Shepard 7 Century Drive, Suite 201 Parsippany, NJ 07054

Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179

Dept of Ed / Navient Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773

EOS CCA PO BBOX 981008 Boston, MA 02298

Family Care 257 East Route 22 Green Brook, NJ 08812

Husband and wife

IC System, Inc.
444 Highway 96 East
P. O. Box 64437
Saint Paul, MN 55164-0437

Kohls/Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Rubin & Rothman, LLC 1787 Veterans Highway Islandia, NY 11749

SaVit Collection Agency Attn: Bankruptcy Po Box 250 East Brunswick, NJ 08816

Verizon Verizon Wireless Bk Admin 500 Technology Dr Ste 550 Weldon Springs, MO 63304

Wells Fargo Home Mortgage Attn: Bankruptcy Dept P.O. Box 10335 Des Moines, IA 50306